

**BEST AVAILABLE COPY**

<b>CLAIMS ONLY</b>						SERIAL NO.		FILING DATE				
						APPLICANT(S)						
<b>CLAIMS</b>												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
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\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS